

U.S. Department of Justice
United States Marshals Service

RECEIVED C/C PROCESS RECEIPT AND RETURN
U.S. MARSHALS SERVICE

PLAINTIFF UNITED STATES OF AMERICA	2019 MAY 31 AM 10:20	COURT CASE NUMBER CV 18-8423 (RGK) (PJWx)	LOG# 218 105.3
DEFENDANT \$404,374.12 BANK FUNDS-NATIONAL BANK OF ARIZONA ACCT '0178, ET AL.		TYPE OF PROCESS COMPLAINT / WARRANT	

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	Number of process to be served with this Form 285
AUSA JOHN J. KUCERA U. S. COURTHOUSE 312 N. SPRING STREET, 14TH FLOOR LOS ANGELES, CA 90012	Number of parties to be served in this case
	Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

CATS: 18-USP-001110 (Acct '3645); 18-USP-001433 (Acct '6910); 18-USP-001432 (Acct '4301); 18-USP-001431 (Acct '8001)
Please seize the defendant funds.
AMENDED TO REFLECT USMS REQUEST

Fold

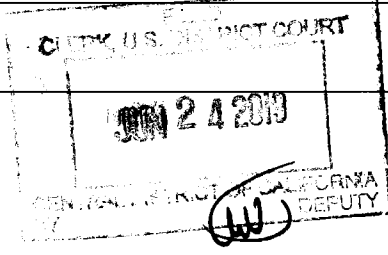
Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER (213) 894-3391	DATE 5/28/19
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 12	District to Serve No. 12	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 5/31/19
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)		<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only different than shown above)		Date 6/10/19	Time 12:00 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
		Signature of U.S. Marshal or Deputy <i>[Signature]</i>	

Service Fee	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
\$65.00			\$65.00		\$65.00 XX000X

REMARKS: Seized \$995,312.49 (18-USP-001110, 18-USP-001433, 18-USP-001432, 18-USP-001431) as CV 18-8423 on 05/16/2019.

PRINT 5 COPIES:

1. [REDACTED]
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED